

## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWA!! STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST	(1)000111111			
NAME (Last)	(First)	(Middle)	TELEPHONE	
YIM	Ernette	Kawehiokalani	356-2247	
MAILING ADDRESS (Street)			FAX	
2057 Akaikai Loop			N/A	
(City)	(State)	(Zi	(Zip Code)	
Pearl City	HI	96	96782	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
HAWAIIAN HUMANE SOCIETY			946-2187	
MAILING ADDRESS (Street)			FAX	
2700 Waialae Avenue			955-6034	
(City)	(State)	(Zi	(Zip Code)	
Honolulu	HI	96	96826–1899	

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE			
HAWAIIAN HUMANE SOC	946–2187				
MAILING ADDRESS (Street)		FAX			
2700 Waialae Avenue		955-6034			
(City)	(State)	(Zip Code)			
Honolulu	HI	96826–1899			
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE			
Kawehi Yim	356-2247				
MAILING ADDRESS (Street)	FAX				
2700 Waialae Avenue		955–6034			
(City)	(State)	(Zip Code)			
Honolulu	HI	96826–1899			

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
Agriculture	Education	☐ Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	☐ Transportation		
Culture, Arts, Historic Preservation	☐ Health	<ul><li>Planning, Land &amp; Water</li><li>Use Management</li></ul>	Other: (indicate below)		
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections	Animal-related issue		
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	ON OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
multo T. t. 3/2			30 2007		
	_(Signature of Lobbyist)		(Date)		
	ON TO LOBBY				
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
PAMELA BURNS	President & CEO				
NAME OF ORGANIZATION (if a	pplicable)		TELEPHONE		
HAWAIIAN HUMANE SOCIETY			946–2187		
MAILING ADDRESS (Street)			FAX		
2700 Waialae Avenue			955–6034		
(City)	(State)	A	(Zip Code)		
Honolulu	ні		96826–1899		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.					
- Currun	h	4.	12.07		
∖ (Signature of A	uthorizing Officer or Person Repres	sented)	(Date)		